

DHHS Waiver Advisory Committee (DWAC) (formerly known as EMT)

The DHHS Waiver Advisory Committee (DWAC) is an advisory body to DHHS that will provide input and consultation over the following:

1. Implementation / Operational phases of the 1915 b/c Medicaid waivers
2. Ongoing LME-MCO operations (Medicaid managed care, Innovations, and LME operations)

The DWAC will meet monthly through the implementation phase. An initial DWAC will be convened by January 2012. It will be reconstituted in January 2013 after all MCOs are operational to allow for representation from these new entities and representative constituents. After, January 2013, the DWAC will transition to quarterly meetings in the operational phase of LME-MCO. The chair of DWAC will be selected by its members. Family and consumer members will receive the standard stipend current allowed by state policy.

The DWAC will be comprised of staff from DHHS, DMA, DMHDDSAS, LME-MCOs, and representatives from provider and consumer/service recipient groups. The DWAC will review quarterly and annual report summaries of LME-MCO performance. The DWAC will provide consultation around local and statewide system goals; review outcome measures and trend data; will highlight and recommend areas of best practice; and will assist with problem identification and resolution. Individual Intradepartmental Monitoring Team (IMTs) assigned to each LME-MCO and stakeholders will report community accomplishments and concerns to the DWAC.

To ensure maximum stakeholder input, the groups listed below should designate a representative. After the initial period and beginning in January 2013 members will serve on the DWAC for a two year term. Each group representative will serve on the DWAC to communicate issues, concerns, and feedback from its constituent group. The representative should communicate back to their stakeholder group. Opportunity for public comment will be available at the end of each meeting.

Membership from Stakeholder groups:

- 1) Three members representing providers, with two representing local provider network councils of the LME-MCOs and one representing a statewide provider or state provider association
- 2) Two members representing the State CFAC and two members representing local CFACs. Each disability group must be represented by at least one member. Recommendations coordinated by State CFAC.
- 3) Three service recipients not on state or local CFAC, one from each disability group
- 4) One member representing the External Advisory Committee (EAT)
- 5) Two members representing the County Commissioners recommended by the NC Association of County Commissioners
- 6) Two members representing the LME-MCOs recommended by the NC Council of Community Programs

Members assigned from the Division of Medical Assistance (DMA):

- 1) Division Director or designee
- 2) Chief Clinical Operations Officer or designee

Members assigned from the Division of MH/DD/SAS:

- 1) Division Director or designee
- 2) Medical Director or designee

DHHS: Deputy Secretary for Health Services or designee

Stakeholder Groups should submit their final candidate(s) recommendation with resume and contact information, to: Tammie.Bradshaw@dhhs.nc.gov , no later than January 6, 2012. Individuals seeking to represent the service recipient category should submit a letter of interest with qualifications to: Tammie.Bradshaw@dhhs.nc.gov, no later than January 6, 2012. Confirmation announcements of all Waiver Advisory Committee Membership will be made by January 13, 2012. The first introductory committee meeting is tentatively set for Tuesday January 24, 2012, meeting location to be determined. A two hour meeting is planned with a 20 minute public comment session at the end of the meeting. The advisory committee plans to meet on the 4th Tuesday of each month. For any additional questions or comments they can be routed to: Kathy Nichols with DMA at 919-855-4289 or Ken Marsh with DMHDDSAS at 919-715-1294.